Application Data Sheet

Application Information

Application Type:: Regular

Subject Matter:: Utility

Suggested Classification:: None

Suggested Group Art Unit:: None

CD-ROM or CD-R?::

Title (line one):: A METHOD OF FORMING A DEEP-

Title (line two):: FEATURED TEMPLATE EMPLOYED IN

Title (line three):: IMPRINT LITHOGRAPHY

Attorney Docket Number:: P102-44-03

Request for Early Publication?:: No

Request for Non-Publication?:: No

Suggested Drawing Figure:: 6

Total Drawing Sheets:: 3

Small Entity?:: No

Petition Included?:: No

Secrecy Order in Parent Appl.?:: No

Inventor Information

First Applicant Authority Type:: Inventor

Status:: Full Capacity

Given Name:: Michael

Middle Name:: P.C.

Family Name:: Watts

City of Residence:: Austin

State or Province of Residence:: TX

Country of Residence:: USA

Street mailing address:: 9404 Bell Mountain Drive

City of mailing address:: Austin

State or Province of mailing address:: TX

Postal or Zip Code of mailing address:: 78730-2709

Second Applicant Authority Type:: Inventor

Primary Citizenship Country:: USA

Status:: Full

Given Name:: Nicholas

Middle Name:: A.

Family Name:: Stacey

City of Residence:: Austin

State or Province of Residence:: TX

Country of Residence:: USA

Street mailing address:: 3209 Bonnie Road

City of mailing address:: Austin

State or Province of mailing address:: TX

Postal or Zip Code of mailing address:: 78703-2703

Third Applicant Authority Type:: Inventor

Primary Citizenship Country:: USA

Status:: Full Capacity

Given Name:: Michael

Middle Name:: N.

Family Name:: Miller

City of Residence:: Austin

State or Province of Residence:: TX

Country of Residence:: USA

Street mailing address:: 11601 Broad Oaks Drive

City of mailing address:: Austin

State or Province of mailing address:: TX

Postal or Zip Code of mailing address:: 78759-3711

Correspondence Information

Correspondence Customer Number:: None

Name Line One:: Kenneth C. Brooks

Name Line Two:: Molecular Imprints, Inc.

Name Line Three:: Legal Department

Address Line One:: P.O. BOX 81536

City:: Austin

State or Province:: TX

Postal or Zip Code:: 78708-1536

Telephone:: (512) 527-0104

Fax:: (512) 527-0107

Electronic Mail:: None

Representative Information:: None
Domestic Priority Information:: None
Foreign Priority Information:: None

Assignee Information

Assignee Name:: Molecular Imprints, Inc.

Street of mailing address:: 1807-C West Braker Lane, Suite 100

City of mailing address:: Austin

State or Province of mailing address:: TX

Postal or Zip Code of mailing address:: 78758-3605